

PART A APPLICATION

NAME OF FACILITY:

TYPE OF FACILITY:

NAME OF APPLICANT:

OWNER: (if different from applicant)

CONTACT PERSON:

PHONE:

MAILING ADDRESS:

SITE LOCATION: (Describe location and attach map showing exact location):

	YES	NO
KEY MAP ATTACHED		
NEAR-VICINITY MAP ATTACHED		
COPY OF DEED or OWNERSHIP DOCUMENT ATTACHED		

Written notice to adjacent owners or occupants that the undersigned applicant intends to develop a solid waste management facility has been sent. The names and addresses of persons given the notice are shown in the REMARKS section of the form.

TYPED NAME OF APPLICANT:

SIGNATURE OF APPLICANT:

SECTION II

SITING CRITERIA

SUBJECT TO BASE FLOOD		YES		NO
GEOLOGICALLY UNSTABLE AREAS		YES		NO
DISTANCE TO AIRPORT RUNWAY (if applicable)				
DISTANCE TO REGULARLY FLOWING SURFACE WATER BODY OR RIVER				
DISTANCE TO WELL, SPRING OR OTHER GROUNDWATER				
DISTANCE TO PUBLIC ROAD RIGHT-OF-WAY				
DISTANCE TO RESIDENCE, SCHOOL, OR RECREATIONAL AREA				
VERTICAL SEPARATION FROM SEASONAL HIGH WATER TABLE				
GROUNDWATER CAN BE MONITORED		YES		NO
EXCESSIVE SLOPES		YES		NO
COVER MATERIALS READILY AVAILABLE		YES		NO
SPRINGS, SEEPS, OR OTHER INTRUSIONS INTO THE SITE	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
PRESSENCE OF GAS, WATER SWEAGE, OR ELECTRICAL OR OTHER TRANSMISSION LINES UNDER THE SITE	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
EXISTENCE ON THE SITE OF AN OPEN DUMP, UNPERMITTED LANDFILL, LAGOON, OR SIMILAR FACILITY	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
OTHER CRITERIA APPLICABLE TO THE SITE (use REMARKS section, if necessary)				